

# TRANSMITTAL FORM

Application Serial Number	10/560,069
Filing Date	March 14, 2007
First Named Inventor	Stephen John KENT
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket No.	23558-007US
Patent No.	Not applicable
Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time (1/2/3 months)	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Status Inquiry <input type="checkbox"/> Return Receipt Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO/SB/08B <input checked="" type="checkbox"/> Copies of IDS (4) <input type="checkbox"/> Citations	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input type="checkbox"/> Copy of Suppl. European Search Report
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

**CORRESPONDENCE ADDRESS**

Direct all correspondence to: PATENT ADMINISTRATOR  
 Proskauer Rose LLP  
 1001 Pennsylvania Ave., N.W.  
 Suite 400, South  
 Washington, D.C. 2004  
 Tel. No.: (202) 416-6800  
 Fax No.: (202) 416-6899  
 CUSTOMER NO: 61263

**SIGNATURE BLOCK**

Respectfully submitted,  
  
 53,547  
 Paul M. Booth  
 Attorney for the Applicant(s)  
 Proskauer Rose LLP  
 1001 Pennsylvania Ave., N.W.  
 Suite 400, South  
 Washington, D.C. 20004

Date: March 25, 2008  
 Reg. No.: 40,244  
 Tel. No.: (202) 416-6800  
 Fax No.: (202) 416-6899